

TWENTY-NINTH ANNUAL REPORT

OF THE

SUFFOLK LUNATIC ASYLUM.

DECEMBER, 1866.

1867.



## Visiting Magistrates.

F. G. DOUGHTY, Esq. *Chairman.*

ANDERSON, REV. T.	LLOYD, REV. C. W.
ARCHER, REV. C. G.	LONG, W. B. ESQ.
BEDINGFIELD, REV. J.	MIDDLETON, SIR G. N. BROKE, BART.
BENCE, H. A. S. ESQ.	OWEN, REV. H.
BROWN, REV. T.	PACKE, J. ESQ.
BURROUGHES, T. D'EYE, ESQ.	RODWELL, B. B. H. ESQ.
CHEVALLIER, DR.	ROWLEY, SIR C. R. BART.
CORRANCE, F. S. ESQ.	SCHREIBER, F. W. ESQ.
DOUGHTY, F. G. ESQ.	SHEPPARD, J. G. ESQ.
HEIGHAM, J. H. ESQ.	STEEL, REV. J. F.
HILL, REV. C.	STEWART, C. ESQ.
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KERRICH, J. ESQ.	WALFORD, C. ESQ.
KERRISON, SIR E. C. BART.	

# REPORT.

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It has for so long been the custom to shew the annual uniformity of similar progress, that it is almost the gratification of variety to point to the very unusual feature which must open the report of the past year. For many years the almost invariable demand has been for additional room. Though no County pauper has ever been refused, the admissions have been such as to render several alterations compulsory, for the required accommodation. These necessary alterations have now been almost completed: and, as on former occasions, by home labour; and consequently at a cost very much below what could have been otherwise incurred: and it is believed that they have secured for the patients the advantages of a good Asylum; they are extensive enough to meet present wants, and they have received general commendation.

There are in the House, this day, 157 Males, 205 Females.  
Total 362.

				Males.	Females.	Total.
Patients in the House, 31st December, 1865...				162	211	373
Admitted in 1866.....				40	64	104
				202	275	477
		M.	F.	Total.		
Discharged .....		24	35	59		
Died .....		21	35	56		
				45	70	115
Total...				157	205	362
Per centage of Discharges on Admissions, 56 per cent. Deaths on resident members, 10 ditto.						

The admissions and discharges have each been less, the deaths more, than in the year 1865. A tabular statement is added to this report more minutely statistical than formerly, according to the request of the Commissioners in Lunacy.

The number of vacant beds is 19 on the male side, and 18 on the female: the accommodation altogether being sufficient for 400 patients.

The floor space and cubical space provided for each patient, as reported by request to the Poor Law Board, is as under:—

Floor space and cubical space provided for each Inmate.						
	By Night only.		By Night & Day.		For the Sick.	
	Floor space.	Cubical space.	Floor space.	Cubical space.	Floor space.	Cubical space.
	Superficial feet.	Cubic feet.	Superficial feet.	Cubic feet.	Superficial feet.	Cubic feet.
The minimum space allowed to any Inmate.....	63	567	51	515	81	860

This exceeds in each case the space recommended by the Commissioners, one greatest proof of its being amply sufficient is evidenced by the uniform health of the House.

The statements made when some of the late alterations were commenced, may be repeated: that unless any very unexpected pressure should take place, there need be no urgent demand for space for some years to come. There are of course, new requirements frequently asserting themselves in so large an establishment. An official visit almost always brings with it some suggestions which if not imperative, are generally desirable to adopt. The Commissioners' last report contains, among others, a recommendation that similar improvements should be made on the male side of the House to those which have been done on the female side; the lowering of some few remaining darkened windows; the removal of more stone flooring; additional furniture, decorations, &c. The alterations, however, are only such as will afford advantageous occupation for the patients, for whom it is not always easy to obtain that *kind* of employment upon which their welfare so greatly depends. The general character of the individual, as well as his former occupation has to be borne in mind: as the kinds of mental operations may depend upon variable circumstances; the tempera-

ment of the constitution, the different development of the respective organs of the brain, and the habit of *exercise* or *neglect* under which they lie. It always must be a difficult and a ceaseless task to seek to unbar those avenues of activity which are morbidly closed, and to awaken those dormant energies which would otherwise settle themselves into a permanent torpor; and by a physical re-action also, perhaps change their own cause, from a functional derangement, or carbonised state of blood, into organic change of structure.

The admissions of the past year have been of a very unfavourable type; there is evident mental and physical deterioration both in character and conduct. It is very painful indeed to witness the condition in which many helpless patients have been brought; confirmed paralytics, and chronic imbeciles. To this may be attributed the increased mortality; in addition to the decease of several very aged inmates.

According to the Annual Statistics just published (as quoted in the Times, December 19, 1866,) there is an increase of 1076 pauper lunatics in the County and Borough Asylums, above the year 1865: partially arising no doubt from the Clause in the Poor Law Removal Act, which throws the charge for the patients from *off* the Parish to which they belong, and *on* to the common fund of the Union. The transfer, however, is unquestionably advantageous to *them*.

The condition of each patient on admission is most minutely recorded, in fulfilment of the expressed desire of the Commissioners: a suggestion, however, which had been acted on before their printed circular was issued. Two patients only were admitted with slight epileptic bruises, and one somewhat stringently bound with handcuffs and straps. The particulars of two women, whose conditions are noted in the Case Book, came from the same parish, on the same day. They had each of them, black

eyes from bruises. On questioning the one, her answer was, "my husband is a bad man; he struck me." The reply of the other, who heard her neighbour's answer, was, "*my* husband gave me that, but he is not so bad a husband as hers."

There are now between 30 and 40 paralytic cripples, imbeciles, and idiotic children, in the House. Though the opinion of the greatest philosopher the world has ever seen is, that "the souls of idiots are of the same piece with those of Statesmen; but now and then, nature is at fault, and this good guest of ours takes soil in an imperfect body, and so is slackened from shewing her wonders," still the lunatic asylum is a place of quite different and higher system of treatment, than would be proper for the reception of those imperfect bodies. Attention has been repeatedly called by the Commissioners to the very injurious effects of the indiscriminate association of idiot children with lunatics. No adequate means, they say, are practicable to correct their habits, to develop their faculties, or to improve their physical powers. They add, "their removal from asylums is most desirable." The language to which children of a tender age are unavoidably exposed, must have a most baneful influence; and one which may shew its sad effects in after life. A baby boy is now in the House, who has to be taken every morning to the female side; he requires the attention of a nurse. The Poor Law Board have taken a strong interest in this class, and endeavours were made in June last, to remove a selected number from the County Asylum to Barham Union House. The subject is still in abeyance: and however desirable their removal may be, it is very questionable if it would be to their advantage. This however, would hardly be expected, as it is perfectly indisputable that they require a separate abode, with employments and amusements suitable to their condition: one harmless patient has been taken to Tattingstone House.

Several very interesting patients have been discharged

during the last year, with whom a regular correspondence is kept up. It has always been a cause for thankfulness, that any efforts for the welfare of discharged patients, has been acknowledged and appreciated by so many. We can refer to many returned home, in whose hearts peace has found a resting place in the Asylum, though their intellects were incapable of repose: and there are many resident now, with whom it is imperative on principles of Psychological treatment to dwell upon those indisputable truths on which the weary mind may most securely rest, and the troubled heart be still. All departures from sound reason do not verge into the type of the Gadarene demoniac, but ALL that were *lunatic*, as well as those that were taken "with divers diseases," ALL indiscriminately met with sympathy from the multitude who brought them, and from the Great Physician who healed them. Sympathy is never lost upon such patients as these, and when our better affections are called into exercise, they will not allow of our being indifferent or unaffected spectators of their sorrows. "They thank us much for what is *said* or done, but well WE know their thanks are for our *tears*."\*

In turning from the sorrows and sorrowers, the sicknesses and the sick in body and mind of the world without to those of the world within, we consistently keep up the contrast in an industrious and contented household. While it is feared that there are very few (probably not more than 20) who can be brought under the designation, "*curable*," there are many who are cheerfully, usefully, and profitably employed. As many as 40 have been working at the pond at the side of the front meadow. This labour will be soon completed, and the supply of water by the enlargement of the pond at the back of the premises, will, it is hoped, be sufficient for working a fire-engine, and affording some security against fire to so large a number of inmates. The

\* Henry Taylor's "*Philip Van Artivalde*."

newly-built asylums are made fire-proof; *this* time honoured structure has too long been hazardously exposed.

The superintending patient at the farm was much distressed at the death of a cow after calving; and his esteem and love of antiquity received a great check, as he ascertained that books even of 150 years old, could not tell him how to cure this bovine fever.

A female complains that she gets no relief from medical treatment: her resolve is to try surgical; and she insists on an incision being made in her back to let out the bile from which she suffers. It has been secreting she says for years, and of course it will take years to remove it. In this she shews what has been stated as a *genuine* symptom of insanity; correct reasoning from false premises.

One woman complaining of the disturbance she experienced from another, says, "there never was so much noise where the Riot Act was not read." The answer of the accused party was, "that a black cow might as well be blamed for giving white milk," as she deserved to be on such a charge. These cases may be noted as types of others in the House, and certainly they are not indicative of discomfort.

The usual indulgences have been enjoyed by the patients, with the latitude of space beyond the Asylum premises. Advantage has been taken of the permissive clause in the 79th of 16 and 17th Vict., and six patients were sent home on trial: two returned at the end of a month. The 81st clause which sanctions the discharge of patients at the request of friends, should be guarded by the addition of a witness's name to the engagement, that "he shall be no longer chargeable to any union, county, or parish." The case of an escaped criminal lunatic was reported to the Secretary of State, who sanctioned the erasure of his name from the books. Intelligence has been received of a Suffolk pauper, now in the Kent asylum. He has by good luck more than merit escaped the distinctive cognomen of *criminal*; though his dangerous and destructive acts, render



him a fit subject for the asylum at Broadmoor. Application is being made for his admission there.

Great distress and anxiety were created throughout the House, by a most determined attempt at suicide in the month of August. After the most careful watching the man recovered, through the judicious aid of Mr. GISSING, of Woodbridge, and went home on the application of his parents. His sister is still in the Asylum. Another similar attempt, but not of so formidable a character, was made by another patient a few weeks back: this man also recovered, and is now convalescent. It is difficult to describe the feelings of *anguish* which literally *stun* the officers and attendants, on these awful acts. The most vigilant watching and guarded oversight will not prevent their occasional occurrence. The attempts are generally made by melancholics; who frequently harbour erroneous impressions, from listening to fanatical distortions of the gospel, and injudicious discourse on the doctrines of reprobation. All intercourse with such patients should be very guarded indeed, and invariably referred to medical authority and sanction.

The practice of domestic psalmody among the patients has been continued with great success. Many visitors have been gratified by hearing their hearty and harmonious strains, given with expressions of earnestness and feeling; proving that music is to them a solace and delight. It has indeed, its purifying as well as pacifying influence, soothing the patient, not through the medium of the ear alone by the influence of sound, but through the medium of the mind by the influence of *thought*. When music sounds in the ear, the heart is attuned to cordiality: permanent kindness is promoted by this heavenly expedient, with better augury than when the king, who was mad, was temporarily charmed from his self-consciousness by the sweet touches of David's harp.

The Superintendent desires once again to acknowledge the cordial co-operation which he has received from the

sub-officers and attendants throughout the year. His special thanks are due to the Steward and Engineer for the voluntary surrender of their rooms, at a time when an increase of patients made the proper provision for them very perplexing. These officers sacrificed their own comfort, that their apartments might be made available for the required accommodation. Their new rooms are now only partially completed, and though they have been subjected to inconvenience throughout the past year, they have willingly and cheerfully submitted to it.

Honest testimony also may be borne to the vigilance and care of the attendants; and those who know how responsible and arduous (and at the same time how depressing) their duties are, will feel how much forbearance and considerate indulgence they require. They are most properly, but at the same time most stringently tied; punished justly and severely if they strike a blow, and taught unresistingly to bear one. The most *tender* care of their patients is enjoined upon them, but they cannot possess that assumption of authority which frequently confers the possession of it: and the Superintendent knows well the value of unblemished character and long-tried service. However energetically *individual* efforts may be made, they are quite unequal in themselves to produce those benefits which an asylum should afford. Union in philanthropic action is vastly more binding in salutary effects, than any orders wrapt up in Blue Books and Acts of Parliament.

The Asylum has now for many years grown with its successive additions; and in acknowledging the considerate support of the Committee through a very anxious, and from various causes *internally* and *externally*, an unusually harrassing year, the Superintendent may be allowed to record his own experience, to justify the conviction, that the improvements in the Building and the comfort of the patients, have advanced silently and surely.

JOHN KIRKMAN, M.D.

TABLE I.—Showing the ADMISSIONS, RE-ADMISSIONS, DISCHARGES, and DEATHS, during the year 1866.

	Male.	Female.	Total.
In the Asylum January 1st, 1866 -	162	211	373
	Male.	Fem.	Total.
Admitted for the first time during the year	38	61	99
Re-admitted during the year	-	-	2
			3
			5
	40	64	104
Total under care during the year	202	275	477
Discharged or removed—			
Recovered -	16	30	46
Relieved -	7	3	10
Not improved -	1	3	4
Died -	21	35	56
Total discharged and died during the year	45	71	116
Remaining in the Asylum, 31st December, 1866, (inclusive of absent on trial—males and females)	157	204	361
Average numbers resident during the year	156	206	362

TABLE II.—Shewing the ADMISSIONS, DISCHARGES, and DEATHS; with Admissions, for each Year

YEARS.	Admitted.			Discharged.							
				Recovered.			Relieved.			Not Improved.	
	Male.	Fem.	Total.	Male.	Fem.	Total.	Male.	Fem.	Total.	Male.	Fem.
From the opening of the Asylum to 31st Dec. 1859	1202	1253	2555	526	654	1180	108	122	230	17	20
1860 - - - -	42	65	107	10	37	47	1	2	3		
1861 - - - -	46	56	102	25	30	55	4	5	9		
1862 - - - -	53	61	114	22	27	49	4	4	8		1
1863 - - - -	54	61	115	21	35	56	1	5	6		
1864 - - - -	45	70	115	20	34	54	4	3	7		
1865 - - - -	61	60	121	26	30	56	6	5	11		
1866 - - - -	40	64	104	17	33	50	7	3	10		
TOTALS <sup>66</sup> (38 years) and Averages -	1543	1690	3333	667	880	1547	135	149	284	17	21

TABLE III.—Showing the History of the ANNUAL ADMISSIONS since the each Year remaining

YEAR.	Admitted.					Of each Year's Discharged and Died in									
	New Cases.		Relapsed Cases.			Recovered.			Relieved.			Not Improved.			
	Males.	Fem.	Males.	Fem.	Total.	Males.	Fem.	Total.	Males.	Fem.	Total.	Males.	Fem.	Total.	
1859 -	1190	1237	12	16	2555	526	654	1180	113	124	237	17	20	37	
1860 -	42	65			107	10	37	47	1	2	3				
1861 -	46	55		1	102	25	30	55	4	5	9				
1862 -	53	61			114	22	27	49	4	4	8		1	1	
1863 -	54	61			115	21	35	56	1	5	6				
1864 -	45	68		2	115	20	34	54	4	3	7				
1865 -	58	59	3	1	121	26	30	56	6	5	11				
1866 -	38	63	2	1	104	17	33	50	7	3	10				
TOTAL.	1526	1669	17	21	3333	667	880	1547	140	151	291	17	21	38	

SUMMARY of the Total Admissions

Per-centage of Cases Recovered -
"    Relieved
"    Not Improved
"    Dead -
"    Remaining -

Annual Mortality and the proportion of Recoveries per Cent. of the opening of the Asylum.

Died.	Remaining 31st December, 1866.					Average Numbers Resident.			Per-centage of Recoveries on Admissions.			Per-centage of Deaths on Average Numbers Resident.		
	Fem.	Total.	Male.	Fem.	Total.	Male.	Fem.	Total.	Male.	Fem.	Mean.	Male.	Fem.	Mean.
0	393	823	3087	3631	6718	98	110	208	43	52	47	13	10	11
0	18	38	142	189	331	141	181	322	23	56	39	14	20	17
0	23	53	129	186	315	144	185	329	17	16	16	20	12	16
8	15	33	138	201	339	146	190	336	15	14	14	12	7	9
5	25	50	145	197	342	148	190	338	16	18	17	16	13	14
3	28	41	153	202	355	152	194	346	13	17	15	8	14	11
0	15	35	162	211	373	161	211	372	16	14	15	12	7	9
1	35	56	157	204	361	156	206	362	11	16	13	13	16	14
7	552	1129	4113	5021	9134	1146	1467	2613	154	203	176	108	99	103

of the Asylum, with the DISCHARGES and DEATHS, and the Numbers of 31st December, 1866.

Total.	Total Discharged and Died of each Year's Admissions.												Remaining of each Year's Admissions 31st December 1866		
	Recovered.			Relieved.			Not Improved.			Died.			Males.	Fem.	Total.
	Males.	Fem.	Total.	Males.	Fem.	Total.	Males.	Fem.	Total.	Males.	Fem.	Total.			
823	526	654	1180	108	122	230	17	20	37	430	393	823	3087	3631	6718
38	10	37	47	1	2	3				20	18	38	142	189	331
53	25	30	55	4	5	9				30	23	53	129	186	315
33	22	27	49	4	4	8	1	1		18	15	33	138	201	339
50	21	35	56	1	5	6				25	25	50	145	197	342
41	20	34	54	4	3	7				13	28	41	153	202	355
35	26	30	56	6	5	11				20	15	35	162	211	373
56	17	35	50	7	3	10				21	35	56	157	204	361
129	667	880	1547	135	149	284	17	21	38	627	552	1129	4113	5021	9134

6.	Males.	Females.	Total.
-	154	203	357
-	135	149	284
-	17	21	38
-	21	35	56
-	157	204	361

TABLE IV.—Showing the ADMISSIONS, RE-ADMISSIONS, DISCHARGES, and DEATHS, from the opening of the Asylum to the present date, December 31, 1866.

	Male.	Female.	Total.
Persons admitted during the period of 38 years - - - -	1412	1648	3060
Total of cases admitted - -			
	Male.	Female.	Total.
Discharged or removed—			
Recovered - - - -	652	858	1510
Relieved - - - -	141	162	303
Not improved - - - -	17	21	38
Died - - - -	574	541	1115
Total discharged and died during the 38 years - - - -	1384	1582	2966
Remaining, 31st December, 1866 -	157	204	361
Average numbers resident during the 38 years - - - -	124	150	274

TABLE V.—Showing the Causes of DEATH during the year.

Causes of Death.	Male.	Fem.	Total
CEREBRAL OR SPINAL DISEASE :			
Apoplexy and Paralysis - - - - -	7	5	12
Epilepsy and Convulsions - - - - -	1	7	8
General Paralysis - - - - -		1	1
Maniacal and melancholic exhaustion or decay - - - - -	2	6	8
Inflammation and other diseases of the Brain, softening, tumours, &c. - - -	1		1
THORACIC DISEASE :			
Inflammation of the Lungs, Pleuræ, and Bronchi - - - - -			
Pulmonary Consumption - - - - -		2	2
Disease of the Heart, &c. - - - - -	2	1	3
ABDOMINAL DISEASE :			
Inflammation of the Stomach, Intestines, or Peritoneum - - - - -			
Dysentery and Diarrhœa - - - - -	2	1	3
Fever - - - - -			
Erysipelas - - - - -		1	1
Cancer - - - - -			
General Debility and Old Age - - - -	5	10	15
Suicide and Accidents - - - - -			
Scrofula - - - - -	1	1	2
TOTAL - - - - -	21	35	56

TABLE VI.—Showing the Length of Residence in those Discharged RECOVERED, and in those who have DIED during the year.

Length of Residence.	Recovered.			Died.		
	Male.	Fem.	Total	Male.	Fem.	Total
Under 1 month - - -	2	2	4	2	7	9
From 1 to 3 months -	6	7	13	2	5	7
"  3  "  6  "  -  -	7	9	16	4	3	7
"  6  "  9  "  -  -		3	3	1	2	3
"  9  "  12  "  -  -	3	6	9	1	1	2
"  1  "  2  years  -  -	2	5	7	5	2	7
"  2  "  3  "  -  -	2	2	4	3	5	8
"  3  "  5  "  -  -	2		2		4	4
"  5  "  7  "  -  -		1	1	1	1	2
"  7  "  10  "  -  -		1	1	1	1	2
"  10  "  12  "  -  -					3	3
"  12  "  15  "  -  -				1		1
"  15  "  20  "  -  -						
"  20  "  30  "  -  -					1	1
"  30  "  40  "  -  -						
TOTAL - -	24	36	60	21	35	56